










MOBILE FOOD LICENSE APPLICATION

I. ESTABLISHMENT INFORMATION						
Date of Application						
Name of Operation						
Name of Owner						
Address of Owner						
Phone Number		Email				
II. APPLICANT/OWNER INFORMATION						
Applicant Name						
Mailing Address						
	City		State		Zip	
Phone Number		Email				
III. LICENSED COMMISSARY INFORMATION						
Name of Commissary						
Full Address						
IV. ESTABLISHMENT INFORMATION						
Type (Circle)	Concession Trailer/Truck	Pushcarts	Portable Structure			
	Cooker & BBQ Pit	Frozen Food Truck/Cart	Soft-Serve Ice Cream Truck			

Make		Model			
License Plate #		VIN#		Ttl Sq Ft	

Size of lettering on mobile unit:

(Note: The name and city of origin shall be displayed with individual lettering measuring at least three inches (3") high and one inch (1") wide -- must state NAME (dba,) CITY, STATE, AND TELEPHONE NUMBER INCLUDING THE AREA CODE.)

V. BASIC REQUIREMENTS CHECKLIST							
	- Commercial cooking equipment						
	- Commercial refrigerators / freezers						
	- Three (3) compartment sink with a faucet and drain -- large enough to hold the largest pieces of equipment which can be submerged at least 50% at a time. <table border="1" style="margin: 10px auto; width: 60%; text-align: center;"> <tr> <td style="padding: 10px;">WASH</td> <td style="padding: 10px;">RINSE</td> <td style="padding: 10px;">SANITIZE</td> </tr> <tr> <td style="padding: 10px;"></td> <td style="padding: 10px;"></td> <td style="padding: 10px;"></td> </tr> </table>	WASH	RINSE	SANITIZE			
WASH	RINSE	SANITIZE					
							
	- Sanitizer solution with appropriate test kit (Chlorine, Quaternary Ammonium, etc.)						
	- Hand sink with a faucet and drain (soap, paper towels)						
	- Water system that provides adequate amounts of hot and cold water						
	- Adequate waste water storage tank. (Recommended to be NSF 61 or equivalent water tank with a capacity at least 15% larger than the fresh water holding tank if there is one. Backflow prevention also must be provided.)						
	- Adequate storage for food and dry goods						

	<ul style="list-style-type: none"> - Identification on the outside of the mobile unit must contain the following: <ul style="list-style-type: none"> o 3" tall letters indicating the company name (dba), city, state, and telephone number (including area code)
	<ul style="list-style-type: none"> - All items on the menu must be prepared only in the mobile unit itself.
VI. OTHER OPERATION INFORMATION	
1) Size of freshwater tank & inlet: FRESH WATER SUPPLY TANK: PROVIDE DOCUMENTATION THAT THE TANK IS COMPLIANT WITH NSF STANDARD 61 OR EQUIVALENT.	
2) Size and type of wastewater tank (Note: must be 15% larger than freshwater tank):	
3) Back flow prevention device (Note: food grade hose must be used): <div style="text-align: center;">ASSE 1012 ASSE 1024</div>	
4) Approved water supply source:	
5) Site of grease disposal:	
6) List food suppliers (Note: All foods must be from an approved source):	
7) Provide list of raw foods and how separation will be maintained during storage, preparation, cooking and holding of these foods (NOTE: A consumer advisory is required to inform consumers of the increased risk of food borne illness as a result of consuming such foods):	

8) Explain food preparation procedures of all potential hazardous foods:

Check the categories of Time/Temperature Control for Safety (TCS) foods to be handled, prepared and served in your operation: *(TCS foods are those foods that require time/temperature control for safety to limit pathogenic microorganism growth or toxin formation. Included are animal foods that are raw or heat-treated, plant food that is heat treated or consist of raw seed sprouts, cut melons, cut tomatoes, garlic-in-oil mixtures, and cut leafy greens.)*

CATEGORY

Thin meat, poultry, fish, eggs (Hamburgers, sliced meats, fillets)	YES	NO
Thick meat, whole poultry (Roast beef, whole turkey, chickens, ham)	YES	NO
Cold processed (Salads, sandwiches, vegetables)	YES	NO
Hot processed foods (soups, stews, rice/noodles, gravy, chowders, casseroles)	YES	NO
Bakery Goods (pies, custards, cream fillings & toppings)	YES	NO
Other: _____	YES	NO

9) Method of cooking foods:

10) Method of hot holding of foods, at least 135° F:

11) Method of cold holding (**Note: Mechanical refrigeration is required and must be able to maintain food at a temperature of 41° F or below at all times.**):

12) Will you use shallow pans, ice baths, reduction in volume or size, rapid chilling, or some other cooling method? Please indicate how and where such cooling will take place.

13) Sources of ice (if applicable):

14) How far off the ground will dry goods be stored? (Note: food must be 6" or more off floor/ground)
15) Type of serving utensils used and storage method for utensils:
16) Type of hair restraint(s) used:
17) Glove usage procedure during operation:
18) Size of three compartment sink and drain boards:
19) Type of sanitizer and test strips (Chlorine or Quaternary Ammonium):
20) Method of insect control (E.g.- size of window screen) :
21) Statement indicating method of shielded lighting and lighting intensity must be provided for critical surfaces:
22) Materials for floor, walls and ceiling:
23) Provide list of condiments and how condiments will be stored, offered for self-service, and maintained cold if required:
24) Type and capacity of the water heater (Note: The hot water temperature must reach 110° F) :

25) Explain preparation of raw fruits and vegetables (**Note: Unit must provide a separate sink for washing of fruits or vegetables OR fruits and vegetables may be purchased pre-washed and pre-cut from an approved source**):

26) Describe areas of food preparation (E.g.- tables, counters, etc.):

27) Type of hand washing sink (**Note: must be convenient and have soap and paper towels**):

VII. PERSON-IN-CHARGE (PIC) /STAFFING

1) Will there be a designated PIC at the unit during all times of operation? **YES** **NO**

Name of PIC _____

2) Is there a written policy to exclude or restrict food workers who are sick or have infected cuts?

YES **NO** (Please circle and describe below or attach your employee health policy.)

VIII. MENU

1) List all menu items and ingredients. Identify whether item is raw, pre-cooked, pre-packaged, etc.

IX. EQUIPMENT LIST

Provide a complete listing of all equipment with manufacturer, make, and model number – must be commercial grade and approved by a recognized food equipment testing agency, such as the National Sanitation Foundation (NSF.) (Attach additional sheets if necessary)

TYPE (e.g. – grill, toaster)	MANUFACTURER NAME	MANUFACTURER MODEL #

SIGNATURE of APPLICANT _____

DATE: _____

Instructions for submission

- Gather the completed application along with:
 - o Floor plan, drawn to scale, with equipment, plumbing fixtures, freshwater tank and wastewater tank clearly labelled (**manufacturer's specifications and drawings are acceptable and preferred**).
- Submit the completed application and required documents to:
 - o Cincinnati Health Department - Mobile Food Licensing
3845 William P. Dooley Bypass
Cincinnati, OH 45223